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CLAIMS AS FILED - PART I	FEE
BASIC FEE (37 CFR 1.16(a))	HAN TITY ADDI- TIONAL
S	ADDI- TIONAL
(37 CFR 1.16(c))	ADDI- TIONAL
MULTIPLE DEPENDENT CLAIM PRESENT   (37 CFR 1.16(d))	ADDI- TIONAL
* If the difference in column 1 is less than zero, enter "0" in column 2.  CLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 3)  SMALL ENTITY  OR  OTHER THE SMALL ENTITY  OR  OTHER THE SMALL ENTITY  ADDI-  RATE	ADDI- TIONAL
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3) SMALL ENTITY  CLAIMS HIGHEST NUMBER PRESENT RATE ADDI- RATE	ADDI- TIONAL
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3) SMALL ENTITY  CLAIMS HIGHEST NUMBER PRESENT RATE ADDI- RATE	ADDI- TIONAL
(Column 1) (Column 2) (Column 3) SMALL ENTITY OR OTHER THE SMALL ENTITY  CLAIMS HIGHEST NUMBER PRESENT RATE ADDI-	ADDI- TIONAL
CLAIMS HIGHEST PRESENT RATE ADDI-	ADDI- TIONAL
	TIONAL
7/8/2/40/8/2/47	
Total (37 CFR 1.16(c))	
AFTER   PREVIOUSLY   EXTRA   TIONAL   FEE	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  + \$ = OR + \$ =	
TOTAL ADD'L FEE OR ADD'L FEE	
4DDL FEE OR ADDL FEE	
CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE ADDI- AFTER PREVIOUSLY EXTRA TIONAL	ADDI- TIONAL
AMENDMENT PAID FOR FEE TO TOTAL TOTA	FEE
(37 CFR 1.16(c))    OR   X \$ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  + \$ =	
ADD'L FEE OR ADD'L FEE	
(Column 1) (Column 2) (Column 3)	
CLAIMS HIGHEST NUMBER PRESENT RATE ADDI- RATE AMBROMENT PREVIOUSLY EXTRA FEE AMBROMENT PAID FOR FEE	ADDI- TIONAL FEE
Total (37 CFR 1.16(c)) Minus **.:\	
AMENDMENT	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  + \$ = OR + \$ =	
TOTAL TOTAL ADD'L FEE OR ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".	

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450. Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

plication or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD DG.H.M POOR Effective October 1, 2000 **CLAIMS AS FILED - PART I** SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE [ OR SMALL ENTITY **TOTAL CLAIMS** la RATE FEE FEE RATE FOR BASIC FEE BASIC FEE **NUMBER FILED** NUMBER EXTRA 355.00 710.00 TOTAL CHARGEABLE CLAIMS Minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X40= X80= OR MULTIPLE DEPENDENT CLAIM PRESENT +135= +270= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL 10 OR TOTAL **CLAIMS AS AMENDED - PART II OTHER THAN** SMALL ENTITY **SMALL ENTITY** OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHES ADDI-ADDI-⋖ REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL AMENDMENT **AFTER PREVIOUSLY EXTRA** FEE AMENDMENT PAID FOR FEE **Total** Minus X\$ 9= X\$18= OR Minus Independent X40= X80= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS 10115 ADDI-**ADDI-**0 REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL ENDMENT PREVIOUSLY AFTER **EXTRA** MENDMENT PAID FOR FEE FEE 20 Total Minus X\$ 9= X\$18= OR Minus Independent X40= X80= BOD OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135=OR pd Extra ADDIT. FEE TOTAL ADDIT. FEE (Column 1) (Column 2) (Column 3) 16:15 CLAIMS ADDI-ADDI-O REMAINING NUMBER PRESENT TIONAL TIONAL AMENDMENT **PREVIOUSLY** RATE RATE AFTER **EXTRA** PAID FOR AMENDMENT FEE FEE Total Minus ol X\$ 9= X\$18= OR Minus Independent X40= X80= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE \*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.